

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	2113	10916	5-9-00
RESPONSE FORMALITY REVIEW	2113	10916	7-13-00

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 — (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      0 ..... Objected

Claim	Final	Original	Date
1	10	✓	
2	2	✓	
3	3	✓	
4	4	✓	
5	5	✓	
6	✓	✓	
7	✓	✓	
8	✓	✓	
9	✓	✓	
10	✓	✓	
11	✓	✓	
12	12	✓	
13	13	✓	
14	14	✓	
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17	✓	✓	
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19	✓	✓	
20	✓	✓	
21	✓	✓	
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23	✓	✓	
24	10	✓	
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If more than 150 claims or 10 actions  
staple additional sheet here

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